Claims

1. A method of treatment of a mammal, including man, suffering from a disorder ameliorated by a gastroprokinetic which comprises administering an effective amount of a COX-2 inhibitor or a pharmaceutically acceptable derivative thereof.

2. A method of treatment according to claim 1 wherein the disorder is GORD.

3. A method of treatment according to claim 1 wherein the disorder is ileus.

4. A method of treatment according to claim 1 wherein the disorder is gastroparesis.

5. A method of treatment according to claim 1 wherein the disorder is NUD.

6. A method of treatment according to claim 1 wherein the disorder is NCCP.

7. A method of treatment according to any one of claims 1 to 6 wherein the COX-2 inhibitor is 2-(4-ethoxy-phenyl)-3-(4-methanesulfonyl-phenyl)-pyrazolo[1,5-b]pyridazine; 8-acetyl-3-(4-fluoro-phenyl)-2-(4-methanesulfonyl-phenyl)-imidazo[1,2-a]pyridine; 4-[2-(3-fluoro-phenyl)-6-trifluoromethyl-pyrazolo[1,5-a]pyridin-3-yl]-benzenesulfonamide; N-isobutyl-4-[4-(methylsulfonyl)phenyl]-6-(trifluoromethyl)pyrimidin-2-amine; celecoxib; rofecoxib; valdecoxib; parecoxib; COX 189; etoricoxib (MK663); 4-(4-cyclohexyl-2-methyl-5-oxazolyl)-2-fluorobenzenesulfonamide (JTE-522); nimesulide; flosulide; 5,5-dimethyl-4-(4-methylsulfonylphenyl)-3-(2-propoxy)-5H-furanone (DFP); methanesulfonamide, N-(2-(cyclohexyloxy)-4-nitrophenyl) (NS398); or 5-methanesulfonamido-6-(2,4-difluorothiophenyl)-1-indanone (L-745337);
or a pharmaceutically acceptable derivative thereof.

8. A method of treatment according to any one of claims 1 to 7 wherein the COX-2 inhibitor is 2-(4-ethoxy-phenyl)-3-(4-methanesulfonyl-phenyl)-pyrazolo[1,5-b]pyridazine or a pharmaceutically acceptable derivative.

9. A method of treatment according to claim 8 wherein 2-(4-ethoxy-phenyl)-3-(4-methanesulfonyl-phenyl)-pyrazolo[1,5-b]pyridazine is in the form of its free base.

10. Use of a COX-2 inhibitor or a pharmaceutically acceptable derivative thereof in the manufacture of a medicament for the treatment of a disorder ameliorated by a gastroprokinetic.

11. Use according to claim 10 wherein the disorder is GORD.

12. Use according to claim 10 wherein the disorder is ileus.

13. Use according to claim 10 wherein the disorder is gastroparesis.

14. Use according to claim 10 wherein the disorder is NUD.

15. Use according to claim 10 wherein the disorder is NCCP.

16. Use according to any one of claims 10 to 15 wherein the COX-2 inhibitor is 2-(4-ethoxy-phenyl)-3-(4-methanesulfonyl-phenyl)-pyrazolo[1,5-b]pyridazine; 8-acetyl-3-(4-fluoro-phenyl)-2-(4-methanesulfonyl-phenyl)-imidazo[1,2-a]pyridine; 4-[2-(3-fluoro-phenyl)-6-trifluoromethyl-pyrazolo[1,5-a]pyridin-3-yl]-benzenesulfonamide; N-isobutyl-4-[4-(methylsulfonyl)phenyl]-6-(trifluoromethyl)pyrimidin-2-amine; celecoxib; rofecoxib; valdecoxib; parecoxib; COX 189; etoricoxib (MK663); 4-(4-cyclohexyl-2-methyl-5-oxazolyl)-2-fluorobenzenesulfonamide (JTE-522); nimesulide; flosulide; 5,5-dimethyl-4-(4-methylsulfonylphenyl)-3-(2-propoxy)-5H-furanone (DFP); methanesulfonamide, N-(2-(cyclohexyloxy)-4-nitrophenyl) (NS398); or 5-methanesulfonamido-6-(2,4-difluorothiophenyl)-1-indanone (L-745337);
or a pharmaceutically acceptable derivative thereof.

17. Use according to any one of claims 10 to 16 wherein the COX-2 inhibitor is 2-(4-ethoxy-phenyl)-3-(4-methanesulfonyl-phenyl)-pyrazolo[1,5-b]pyridazine or a pharmaceutically acceptable derivative.

18. Use according to claim 17 wherein 2-(4-ethoxy-phenyl)-3-(4-methanesulfonyl-phenyl)-pyrazolo[1,5-b]pyridazine is in the form of its free base.

19. A COX-2 inhibitor or a pharmaceutically acceptable derivative thereof for use in the treatment of a disorder ameliorated by a gastroprokinetic.

20. The use, as a gastroprokinetic, of a COX-2 inhibitor, or a pharmaceutically acceptable derivative thereof, to enhance the amount of absorption of an orally administered $5HT_1$-like receptor agonist, or a pharmaceutically acceptable derivative thereof.

21. The use, as a gastroprokinetic, of a COX-2 inhibitor, or a pharmaceutically acceptable derivative thereof, to enhance the rate of absorption of an orally administered $5HT_1$-like receptor agonist, or a pharmaceutically acceptable derivative thereof.